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CONFIRMATION NO. 4176

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/081,771	<b>FILING OR 371(c) DATE</b> 02/20/2002 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1637	<b>ATTORNEY DOCKET NO.</b> UCSF-127CIP2
<b>APPLICANTS</b> David R. Cox, Belmont, CA; Malek Faham, Daly City, CA; Siamak Baharloo, San Francisco, CA;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/072,047 02/08/2002 PAT 6,709,827 and is a CIP of 09/271,055 03/17/1999 PAT 6,406,847 which is a CIP of 08/713,751 09/13/1996 ABN which claims benefit of 60/004,664 10/02/1995				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 04/23/2002</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 16	<b>TOTAL CLAIMS</b> 55
Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>INDEPENDENT CLAIMS</b> 8		
<b>ADDRESS</b> 24353				
<b>TITLE</b> MISMATCH REPAIR DETECTION				
<b>FILING FEE RECEIVED</b> 1535	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	